

#	COMMENT	SOURCE	POLICY SECTION	DIDD RESPONSE
1	<b>General Comments:</b> This is an example of -- there's an underlying issue with the policies and chapters that have been presented. It is a lot that is very helpful if the department could list the changes that they are proposing in these chapters and in these policies. Because it's very difficult to figure out what the changes are.I really think that should be a requirement when you're going to a public hearing.We had difficulty with this chapter -- with this policy because we weren't exactly sure what changed. It also needs to provide -- they also need to provide fairly good knowledgeable training to all the components involved that are affected by a policy or are charged with implementing that policy.It sometimes -- what sometimes happens is there is a policy change in the department, at the central office, and it might take three or four years to make its way through all the providers and through the regional offices. So we really are asking the department to be very proactive in avoiding this massive confusion.	Betty McNeely/TNCO	N/A	Duly noted. DIDD will take under advisement.
2	I do need to point out that this particular policy is extremely difficult to follow, and trying to figure out why -- I think probably the best approach would be to make it chronologically. A person dies. And then you follow what's supposed to happen chronologically. And it would make it much clearer for an agency figure out what they're supposed to do and when they're supposed to do it. I believe it was clearer in a previous death reporting policy. It's unclear when an agency is supposed to do a provider death review. Is it in any death of a client that you provide services for? Or is it just if a client should die on your watch? It's really unclear what actually you're supposed to do.	Betty McNeely/TNCO	VI.D.1.	Duly noted. The policy will be reorganized for clarity. Note that the requirement that residential providers conduct the Intial Agency Death Review as stated in Section VI. D. 1 has not changed from previous versions of the policy.
3	The status of the minutes of the death review that the department does talks about them being confidential. And it talks about the purpose is not to be pointing fingers and to try to get people in trouble but to figure out what happened and how things could be improved. It's not clear whether the minutes of those minutes and the recommendations or the conclusions that are drawn, if these are discoverable in a legal sense. And I would really like to get that clarified.	Betty McNeely/TNCO	VI. E.5.	The minutes of the Death Review Committee meetings are discoverable.

4	A kind of funny wrinkle on the policy is it makes a big firm point that agencies must report deaths to DIDD within four hours and the family within 24 hours. That just seems a little confusing. Agencies must report deaths to DIDD within 4 hours and the family within 24 hours?	Betty McNeely/TNCO	VI.A.1.b.	Concur. The language will be revised as follows: "Notice to the person's family, next of kin, and/or legal representative <b>as soon as possible.</b> "
5	This is a <b>general comment</b> . We strongly recommend that because there are significant changes in these policies and in these provider manual chapters that the policy department -- the DIDD's policy department solicit questions from providers or ISCs, post those questions and answers on the department website to really eliminate or at least help prevent massive confusion that usually occurs whether the -- anytime a policy is changed around here.	Betty McNeely/TNCO	N/A	Duly noted. DIDD will take under advisement.
6	Some of the other things that we would request is the policy doesn't make it clear that the executive director of the agency responsible for the individual at the time of death should be on the death review committee. This may or may not be the provider agency primarily responsible for serving the individual.	Tonya Copeland-Evergreen/Lee Chase/TNCO	VI.E.1.a.	Do not concur. This policy has not changed. The executive director or designee of the provider agency primarily responsible participates in the Death Review Committee.
7	It also states at least one program staffer from the provider agency is also on a committee. We assume or we ask clarification be made, if the choice is up to the agency, and that does not necessarily mean the direct support staff. Supervisory and medical staff may have more relevant information in those cases so we want to make sure that's clarified.	Betty McNeely/Tonya Copeland-Evergreen/Lee Chase	VI.E.1.a.	The agency selects the staff person. This will be clarified in the policy.
8	<b>Initial Agency Death Review:</b> Does an agency complete an initial agency death review if the individual died when with the family? Gathering information from the family at this time would be very difficult and an invasion of privacy. If this is not the expectation, this should be made clear. A previous policy on this subject indicated that the agency review was required for the following cases: - Individual was receiving residential services. - Death occurred while attending or transporting day services. - Individual's death resulted from injury or illness directly related to provider agency services.	Betty McNeely/TNCO/Lee Chase	VI.D.1.	If the individual was receiving residential services, but died while with the family (e.g., during a visit), the provider is required to complete an initial agency death review. The department is sympathetic to the concern that it is difficult to obtain information from family members following the death of a loved one. Nonetheless, that the death occurred while with family does not preclude the existence of preventable and systemic conditions that led to the death - that are within the control of the provider. If the person's family declines to participate, this should be noted. The language will be clarified in the policy.

9	The policy seems to imply that initial agency death reviews are completed only by the residential provider. What if the death occurred while the individual was receiving day services?	Betty McNeely/TNCO/lee Chase	VI.D.1.	Do not concur. This policy has not changed. The residential provider is still expected to conduct the Initial Agency Death Review.
10	When the individual has more than one provider, the provider responsible for the individual at the time of death should be responsible for completing the initial agency death review , although participation by the other agency certainly would also be necessary.	Betty McNeely/TNCO	VI.D.1.	Do not concur. This policy has not changed. The residential provider is still expected to conduct the Intial Agency Death Review.
11	<b>Form Comments:</b> The Notice of Death form states to contact the Regional Director, or DIDD Commissioner if applicable or designee by telephone within four hours. The policy (VI.A.1.a.1)b)) states the Regional Office AOD. This difference is unnecessary, as AOD contacts Regional Director, and may be confusing to some.	Betty McNeely/TNCO	Notice of Death Form	Concur. Will revise the Notice of Death Form for clarity.
12	When the death involves a resident of a DIDD developmental center, a medical review or physician peer review of the death may be conducted in accordance with Tennessee Code Annotated 63-6-219, either as part of the Initial Agency Death Review or at any time thereafter.	Marlenia Overholt / Thomas Cheetham	VI.D.1.	Concur . Will revise policy to include.
13	Death Reviews shall be conducted within 45 business days of the individual's death; however, this time period shall be automatically extended when the autopsy report or investigation report is not completed for a period of thirty (30) business days. Any extensions beyond this thirty (30) business days shall require approval of the DIDD Commissioner or designee.	Marlenia Overholt / Thomas Cheetham	VI.E.2.	Concur . Will revise policy to include.
14	This time period may be extended with the approval of the CO Director of Nursing for good cause.	Marlenia Overholt / Thomas Cheetham /Regional Nursing Directors	VI.C.2.	Concur . Will revise policy to include.
15	A death review may be requested by the Commissioner at any time on the advise of the Office of Health Services.	Marlenia Overholt / Thomas Cheetham	VI.E.	Concur. Will revise policy to include.